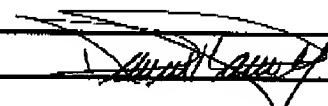
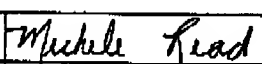


PTO/SB/21 (09-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/888,010	RECEIVED CENTRAL FAX CENTER DEC 07 2004
	Filing Date	March 28, 2002	
	First Named Inventor	Per Eld Isben	
	Art Unit	2877	
	Examiner Name	Gordon J. Stock, Jr.	
	Attorney Docket Number	01485.0012-US-WO	
Total Number of Pages in This Submission		5	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (1 page) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD <input type="checkbox"/> Remarks	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Supplemental Declaration for Utility or Design Patent Application (37 CFR 1.67) (PTO/SB/04 and PTO/SB/02A) (3 pages)
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Altera Law Group, LLC	
Signature		
Printed name	David H. Carroll	
Date	DEC 7, 2004	Reg. No. 29,903

CERTIFICATE OF TRANSMISSION/MAILING		
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Signature		
Typed or printed name	Michele Read	Date December 7, 2004

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Effective on 10/01/2004, Patent fees are subject to annual revision.

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **0**

Complete if Known	
Application Number	09/889,010
Filing Date	March 28, 2002
First Named Inventor	Per Eld Ibsen
Examiner Name	Gordon J. Stock, Jr.
Art Unit	2877
Attorney Docket No.	01485.0012-US-WO

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																				
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Deposit Account <input checked="" type="checkbox"/> None Deposit Account Number: 50-1038 Deposit Account Name: Altera Law Group, LLC The Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Credit any overpayments ... to the above-identified deposit account. <input type="checkbox"/> Other (please identify): _____ WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	2. EXTRA CLAIM FEES <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20</td> <td>18</td> <td>9</td> </tr> <tr> <td>Each independent claim over 3</td> <td>88</td> <td>44</td> </tr> <tr> <td>Multiple dependent claims</td> <td>300</td> <td>150</td> </tr> <tr> <td>For Reissues, each claim over 20 and more than in the original patent</td> <td>18</td> <td>9</td> </tr> <tr> <td>For Reissues, each independent claim more than in the original patent</td> <td>88</td> <td>44</td> </tr> <tr> <td>Total Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> </tr> <tr> <td colspan="3">- 20 or HP = _____ X _____ = _____</td> </tr> <tr> <td colspan="3">HP = highest number of total claims paid for, if greater than 20</td> </tr> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> </tr> <tr> <td colspan="3">- 3 or HP = _____ X _____ = _____</td> </tr> <tr> <td colspan="3">HP = highest number of independent claims paid for, if greater than 3</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td colspan="3">Subtotal (2) \$ 0</td> </tr> </tbody> </table>	Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20	18	9	Each independent claim over 3	88	44	Multiple dependent claims	300	150	For Reissues, each claim over 20 and more than in the original patent	18	9	For Reissues, each independent claim more than in the original patent	88	44	Total Claims	Extra Claims	Fee (\$)	- 20 or HP = _____ X _____ = _____			HP = highest number of total claims paid for, if greater than 20			Indep. Claims	Extra Claims	Fee (\$)	- 3 or HP = _____ X _____ = _____			HP = highest number of independent claims paid for, if greater than 3			Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	Subtotal (2) \$ 0																																												
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1. BASIC FILING FEE <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility Filing Fee</td> <td>790</td> <td>395</td> <td></td> </tr> <tr> <td>Design Filing Fee</td> <td>350</td> <td>175</td> <td></td> </tr> <tr> <td>Plant Filing Fee</td> <td>550</td> <td>275</td> <td></td> </tr> <tr> <td>Reissue Filing Fee</td> <td>790</td> <td>395</td> <td></td> </tr> <tr> <td>Provisional Filing Fee</td> <td>160</td> <td>80</td> <td></td> </tr> <tr> <td colspan="4">Subtotal (1) \$ 0</td> </tr> </tbody> </table>	Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)	Utility Filing Fee	790	395		Design Filing Fee	350	175		Plant Filing Fee	550	275		Reissue Filing Fee	790	395		Provisional Filing Fee	160	80		Subtotal (1) \$ 0				3. OTHER FEES <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>1-month extension of time</td> <td>110</td> <td>55</td> <td></td> </tr> <tr> <td>2-month extension of time</td> <td>430</td> <td>215</td> <td></td> </tr> <tr> <td>3-month extension of time</td> <td>980</td> <td>490</td> <td></td> </tr> <tr> <td>4-month extension of time</td> <td>1,530</td> <td>765</td> <td></td> </tr> <tr> <td>5-month extension of time</td> <td>2,080</td> <td>1,040</td> <td></td> </tr> <tr> <td>Information disclosure stmt. fee</td> <td>180</td> <td>180</td> <td></td> </tr> <tr> <td>37 CFR 1.17(q) processing fee</td> <td>50</td> <td>50</td> <td></td> </tr> <tr> <td>Non-English specification</td> <td>130</td> <td>130</td> <td></td> </tr> <tr> <td>Notice of Appeal</td> <td>340</td> <td>170</td> <td></td> </tr> <tr> <td>Filing a brief in support of appeal</td> <td>340</td> <td>170</td> <td></td> </tr> <tr> <td>Request for oral hearing</td> <td>300</td> <td>150</td> <td></td> </tr> <tr> <td>Other:</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="4">Subtotal (3) \$ 0</td> </tr> </tbody> </table>	Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)	1-month extension of time	110	55		2-month extension of time	430	215		3-month extension of time	980	490		4-month extension of time	1,530	765		5-month extension of time	2,080	1,040		Information disclosure stmt. fee	180	180		37 CFR 1.17(q) processing fee	50	50		Non-English specification	130	130		Notice of Appeal	340	170		Filing a brief in support of appeal	340	170		Request for oral hearing	300	150		Other:				Subtotal (3) \$ 0			
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SUBMITTED BY			
Signature	<i>David H. Carroll</i>	Registration No. (Attorney/Agent)	29,903
Name (Print/Type)	David H. Carroll	Telephone	(952) 253-4135
		Date	DEC 7, 2004

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PTO/SB-0 (05-04)

**SUPPLEMENTAL
DECLARATION FOR UTILITY
OR DESIGN
PATENT APPLICATION
(37 CFR 1.67)**

Attorney Docket Number: 01485.0012-US-WO
First Named Inventor: Per Eid Ibsen
COMPLETELY KNOWN
Application Number: 09/889,010
Filing Date: March 28, 2002
Art Unit: 2877
Examiner Name: Gordon J. Stock, Jr.

I hereby declare that:
Each inventor's residence, mailing address, and citizenship are stated below next to their name.
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SPECTROMETER

(Title of the invention)

The specification of which
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **March 28, 2002** as United States Application Number or PCT International
Application Number **09/889,010** and was amended on (MM/DD/YYYY) **09/889,010**

I hereby declare that the subject matter of the ☐ attached amendment ☐ amendment filed on **09/889,010** was part of the invention and was invented before the filing date of the original application, above identified for such invention.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 351(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
PA 1999 00020	Denmark	01/08/1999	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB-038 attached hereto.



(Page 1 of 2)
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Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unnamed inventor	
Given Name		Family Name or Surname	
Per Eld		Ibsen	
Inventor's Signature		Date	
		30-Nov-2004	
Residence: City	State	Country	Citizenship
Valby		Denmark	Denmark
Mailing Address			
Kirkevaenget 18			
Mailing Address			
City	State	ZIP	Country
Valby		DK-2500	Denmark
Name of Second Inventor		<input type="checkbox"/> A petition has been filed for this unnamed inventor	
Given Name		Family Name or Surname	
Bjarke		Rose	
Inventor's Signature		Date	
		30-Nov-2004	
Residence: City	State	Country	Citizenship
Alleroed		Denmark	Denmark
Mailing Address			
Skovkrogen 14A			
Mailing Address			
City	State	ZIP	Country
Alleroed		DK-3450	Denmark
<input checked="" type="checkbox"/> Additional inventor(s) or legal representative(s) are being named on the 1 supplemental sheet(s) PTO/SB/ 02A or 02LR attached hereto.			

(Page 2 of 2)

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		Page <u>1</u> of <u>1</u>	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Michael		Rasmussen	
Inventor's Signature 		Date	
Residence: City	State	Country	Citizenship
Broenshoej		Denmark	Denmark
Mailing Address			
Hvedevej 18			
City	State	Zip	Country
Broenshoej		DK-2700	Denmark
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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